

PTO/SB/122 (09-03)

CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/767,227
	Filing Date	January 28, 2004
	First Named Inventor	William Welch
	Art Unit	Not Yet Known
	Examiner Name	Not Yet Known
	Attorney Docket Number	019599-000211

Please change the Correspondence Address for the above-identified patent application to:

☒ Customer Number: 20350

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City	State	ZIP	
Country			
Telephone	Fax		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

- ☐ Applicant/Inventor.
- ☐ Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or agent of record. Registration Number 42,358
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed Name Irvin E. Branch

Signature

Date May 10, 2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of one forms are submitted.

60212821 v1

BEST AVAILABLE COPY